Michigan Department of Treasury 627, Formerly L-4154 (Rev. 10-04)

Access or I		Director's Noti	oo of Dropor	ha s	Office Use Only	
Assessor or lincorrectly R		File Number				
ssued under authority of Se		Assessment Unit Number				
MUST BE TYPED OR PRINTED LEGIBLY. Name of Assessor or Equalization Director Filing this Notice			Tele	phone Number	Assessor Certification Number	
Name of Assessing Unit		Address (Number, Street, City o	r Post Office and ZIP)			
PROPERTY AND A	ASSESSMENT RO	LL INFORMATION				
Name(s) of Property Owner	r(s)					
Owner's Address (Number,	Street, City, State and ZIP)				
County Where Property is L	ocated		City or Township or Village and Township			
School District		Intermediate School Distric	ct	Community College District		
			Descrit Olera Esstad			
Property Index Number (or	enter property description t	elow)	Property Classification			
Is this property assessed Facilities Assessment R		ties Tax Assessment Roll, th Act 189 of 1953? Yes		s Tax Assessment Roll, ecify which roll.	the Technology Park	
Answer the following que February 20 for each year		r personal property. Did the	owner complete and de	eliver a personal propert	ty statement on or before ot timely filed.	
Property Description			•		•	
	Assessed Value			Taxable Value		
Complete the applicable Assessed Value lines below when the notice is for a change in Assessed Value.			Complete the applicable Taxable Value lines below when the notice is for change in Taxable Value. For most personal property, the figures on the lines below will be the same as the figures under Assessed Value. For omitted real property, the amount of omitted Taxable Value may be less than the amount of omitted Assessed Value (see page 6 of State Tax Commission Bulletin 3 of 1995).			
Year(s) For Which Notice Was Given	Assessed Value on Assessment Roll	Requested Assessed Value	Year(s) For Which Notice Was Given	Taxable Value or Assessment Roll		
Reason for This Notice. Atta	ach supporting information	For incorrectly reported person	al property, include a copy	of the timely-filed persona	al property statement and the dreal property was not previously	
included in the assessment		real property, provide a record (sard of other documentat	ion showing that the office	a real property was not previously	

TAX RATE INFORMATION (to be completed by the assessor)

If this notice is for either or both of the tax years immediately preceding the current year, the assessor shall list for each year covered by this notice the total tax rate levied in the city or township in which the property is located. The total annual tax rate levied must include the total village tax rate, if applicable. If this notice is for omitted real property upon which "millage rate" special assessments were levied, list those rates separately below. Do not include special assessments levied in specific dollar amounts.

Year Covered By Notice	SUMMER Total Tax Rate Levied	WINTER Total Tax Rate Levied	Total Annual Tax Rate Levied	
•				
SPECIAL ASSESSMENT RA	TES. Complete lines below for	 or special assessment millag	le rates only	
Year Covered By Notice	SUMMER Special Assessment	WINTER Special Assessment	I Assessment Total Annual Special Assessment	
,	Rate Levied	Rate Levied	Rate Levied	
SIGNATURE	240		Data	
Signature of Assessor or Equalization Direct	CTOF		Date	
the current calendar year may at this form. OWNER'S CONCURRENCE (This section shall be completed by I concur (agree) with this reques	ffect the Commission's jurisdiction OR DISAGREEMENT WITH THE y the property owner and the form the st for corrected Assessed Value and/or	to consider all of the assessmen HIS REQUEST returned to the assessor. Taxable Value.	ailure to do so by December 31 of at years that you have included on	
I do not concur with this reques assessor an explanation of the	t for corrected Assessed Value and/or reason for not concurring.	Taxable Value. The owner who check	s this box must submit to the	
Comments or Explanations				
	e change ownership during the time pe No If yes, give date.	riod starting with the earliest year for v	which a change is being reuqested,	
Signature of Property Owner	110 , 50, g 5 date.	Date	Telephone Number	
			'	

Assessors must send this completed form to:

The State Tax Commission Michigan Department of Treasury PO Box 30471 Lansing, MI 48909-7971